

“Arogya Protect”

new group health insurance product exclusively for the customers of our Bank by providing comprehensive health insurance plan at affordable price, which covers medical expenses in case of medical emergencies and secure coverage for proposers & their family at a **flat Premium**.

The features of product are detailed below:

Sum Insured options	Rs 5 lakhs, Rs 10 lakhs, Rs 15 lakhs, Rs 20 lakhs
Who can take this policy	All Indian nationals who are holding a savings bank account with us.
Cover Types	Individual Policy & Family Floater “Family” includes the spouse and dependent children. Floater option available for self, spouse and maximum two children.
Age Criteria	Entry Age for Adult: Min- 18 years, Max- 65 years Entry Age for Dependent Child: Min- 3 Months, Max- 25 years Dependent child -Financially dependent on primary member not more than age of 25 years.
Policy Tenure	Annual.
Premium Payment	Single payment (Once in a year)
Grace Period/Free Look Period	30 Days Grace Period; 30 Days Free Look Period
Renewal	Life Long , renewable every year
Addition of Members	Insured can add members of their family in existing policy at the time of renewal subject to the conditions stipulated under family floater policy. However, a newborn baby older than the eligible number of days of coverage as specified in the policy schedule/certificate of insurance can be covered under the policy as an insured person only by way of an endorsement or at the next renewal, whichever is earlier, on payment of the additional premium (if applicable)
Coverages under the Plan	1. Inpatient Care: Admission in hospital beyond 24 hours a. Room rent: Expenses incurred on Room rent will be covered up to the limits specified in the policy schedule.

	<p>b. ICU: Expenses incurred on ICU will be covered up to the limits specified in the policy schedule.</p>
	<p>2. Organ Donor Expenses: Medical expenses incurred up to the limit of 10% of base sum insured towards organ donor expenses.</p>
	<p>3. Day Care treatment: Medical expenses incurred for day care treatment/ procedure will be covered up to the limits specified in the policy schedule.</p>
	<p>4. Pre-hospitalization Medical Expenses: Covered prior to 60 days of hospitalization.</p>
	<p>5. Post-hospitalization Medical Expenses: Covered post 90 days of hospitalization.</p>
	<p>6. Modern Treatment: Medical expenses incurred up to the limit of 50% of base sum insured towards modern treatment.</p>
	<p>7. Inpatient care under Alternative Treatment: Medical expenses incurred by alternative/ Ayush treatment methods will be covered up to the limits specified in the policy schedule.</p>
	<p>8. Domiciliary Hospitalization: Medical expenses up to the sum insured as specified in the policy schedule.</p>
	<p>9. Bariatric Surgery: Medical expenses incurred up to the limit of 20% of base sum insured towards bariatric surgery.</p>
	<p>10. OPD Cover: Rs. 3000/- per family for 5, Lakh, 10 lakh, 15 lakh, 20 lakhs SI variant. Expenses for OPD consultation and treatment as specified in policy schedule on advice of a medical practitioner.</p>
	<p>11. Emergency Ground Ambulance: Covers expenses up to the limit of Rs. 1500/- per hospitalization.</p>
Waiting Periods:	<ol style="list-style-type: none"> 1. Initial Waiting Period: 30 Days 2. Pre-Existing Disease: 2 years 3. Specific Illness/Disease: 12 Months